

# Lnug Citizenship Application

Date of Application: \_\_\_\_\_ Lnug Date received: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Given Name at Birth: \_\_\_\_\_

Family Name: \_\_\_\_\_

Family Name at Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Education: \_\_\_\_\_

Occupation: \_\_\_\_\_

Full Name of Spouse: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_

Full Name of Mother at Birth: \_\_\_\_\_

Secondary Phone #: \_\_\_\_\_

Date of Birth of Mother: \_\_\_\_\_

Email Address: \_\_\_\_\_

Ethnic association of Mother: \_\_\_\_\_

Emergency contact #: \_\_\_\_\_

Full Name of Father at Birth: \_\_\_\_\_

Primary Heir: \_\_\_\_\_

Date of Birth of Father: \_\_\_\_\_

Ethnic association of Father: \_\_\_\_\_

Full Names of Heirs: \_\_\_\_\_

Reason for Applying: \_\_\_\_\_

Other thoughts and comments: \_\_\_\_\_

The preceding information is collected exclusively for use by the LNC and is confidential. Any unauthorized use of these materials or the information therein is strictly forbidden and constitutes a charge of identity thief. Unauthorized use of the information may result in loss of citizenship.

Print Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

Date: \_\_\_\_\_